
INFORMATION FOR GENERAL CONTRACTOR APPLICATION:

Per Section 4114 of the Columbus Code requires the following be presented in order to secure a contractor registration:

- ☒ A General Contractor Registration Application. Completed and signed by the person chosen to be the responsible party for the company registration. This application must be notarized.
- ☒ A Bond in the amount of \$25,000. THE ENCLOSED BOND FORM MUST BE USED. Specific information for bond completion may be found on the enclosed bond information sheet.
- ☒ A Certificate of Liability Insurance. Written by an insurance company licensed to do business in the State of Ohio with the limits of liability no less than three hundred thousand dollars (\$300,000) for damages to a single person, and five hundred thousand dollars (\$500,000) for one (1) occurrence.
- ☒ Assignment of Registration. If assigning the registration to a business concern, a completed, signed and notarized Assignment Authorized Signer Form is required. In accordance with City Code 4114, when an assignment is made, all documents are to be completed in the name of the business. When completing the assignment form, a list of no more than six (6) full time employees of the business, including registrant must be provided. These individuals are required to sign the assignment form. Only persons whose signatures appear on the assignment form are authorized to sign permit applications.

Paperwork that has omitted either of these pieces of identification will be returned without being processed.

REGISTRATION FEE

For specific fee information please contact (614) 645-6083. Payment may be made in person or by mail to:

Contractor Registration
City of Columbus
Department of Building and Zoning Services
757 Carolyn Avenue
Columbus, Ohio 43224
Checks are to be made payable to Columbus City Treasurer

Minimum Processing Time For submitted documents is 10 business days!

Columbus Building Code 4114.904:

Application for and Issuance of a General Contractor Registration:

- (A) Any person desiring to be a registered general contractor shall apply to the department for such registration on a form prescribed therefore, together with the nonrefundable general contractor registration fee as required by the fee schedule. If no fee has been specifically provided, then the applicant shall pay the general fee prescribed for newly initiated areas of regulation that year. The department shall accept applications for general contractor registrations and such registrations shall be valid for an initial period of at least twelve (12) months.
- (B) The applicant for a general contractor shall meet the following requirements:
 - (1) Be no less than eighteen (18) years of age; and
 - (2) Be a United States citizen or legal alien with valid documentation of being a legal resident of the United States.
- (C) An application for registration as a general contractor shall be confirmed and signed under oath by the applicant. The application shall contain the following information:
 - (1) Name of the applicant;
 - (2) Name of business entity to be registered by the applicant;
 - (3) Date of birth;
 - (4) Current residence and business address of the applicant;
 - (5) Current residence and business telephone numbers of the applicant;
 - (6) Dates of previous general contractor registrations with the department, if any
 - (7) Other information deemed necessary by the department.
- (D) The department's Department of Building and Zoning Services's licensing section shall review and process the application for a general contractor registration.
- (E) Only upon the submission of a complete application for a general contractor registration, shall the department issue to such applicant a general contractor registration.
- (F) The continued validity or renewal of a general contractor registration is dependent upon the proof of and continued maintenance of all the following:
 - (1) Proof of current and valid liability insurance; and
 - (2) The required city bond

If additional information is needed, please call the contractor license message center at (614) 645-6083. This is a voice mailbox. Please leave your name, number, and a brief message. One of our customer service representatives will return your call. Forms and other information can be found at our website at www.columbus.gov.

GENERAL CONTRACTOR APPLICATION



Date: _____

PLEASE NOTE: For application requirements for ANY registration, refer to Columbus Building Code Chapter 4114.

PART I: QUALIFICATION CERTIFICATE HOLDER INFORMATION

I, the undersigned, hereby apply for a Contractor Registration, in the City of Columbus, Ohio and for that purpose give the following information and answers to ALL of the questions contained in this application:

Full Name _____ Date of Birth _____ Telephone Number _____

Home Address _____ City, State, Zip _____

Email Address _____

Have you ever been summoned before any City of Columbus Contractor Board of Review for any type of violation hearing? ☐ Y ☐ N

If Yes, Which Board: _____ Date of Hearing: _____

Board Decision: _____

PART II: BUSINESS/ COMPANY INFORMATION

Company Name _____ Federal ID No. _____ Telephone Number _____

Company Address _____ City, State, Zip _____ Fax Number _____

Business Type (Check One): ☐ Individual Only ☐ Sole Proprietorship ☐ Partnership ☐ Corporation

☐ Other: _____

Responsible Party's Position with the Business/ Company: _____
(ie. President, Vice-President, Partner, Sole-Owner, Employee, etc.)

How long has the Responsible Party been in this position: From: _____ To: _____

ALL FEES ARE NON-REFUNDABLE • Please type or print all information
PLEASE NOTE: Incomplete information will result in the rejection of this submittal.
For all questions regarding this form and fees please call: 614-645-6090
Please make checks payable to the Columbus City Treasurer • www.columbus.gov

PART III: STATEMENT BY APPLICANT

I hereby certify that, to the best of my knowledge and belief, all statements made herein or attached are complete and accurate. I understand that any false statements later disclosed may cause loss of my right of registration, and may subject me to prosecution under Ohio Revised Code Section 2921.13.

Signature of Applicant _____ Print/ Type Name _____ Date _____

Sworn to before me and signed in my presence this _____ day of _____ in the year _____

Notary Seal Here _____
Signature of Notary Public _____ My Commission Expires _____

OFFICAL USE ONLY

Issue Date of Registration: ____/____/____ Registration Number: _____

By (License Section): _____



ASSIGNMENT/AUTHORIZED SIGNER FORM

Date _____

The following individual, having met the requirements for a contractor's license/registration, hereby requests that the license/registration be assigned to the business concern indicated.

The license/registration is to be granted to engage in business as a _____ contractor, as per Chapter 33 or 41 of the Columbus City Code, 1959, as applicable. The individual herein shall be associated with the business concern as a legal full-time officer, proprietor, partner or employee. The individual will be actively engaged in and perform work only for the business concern to which his/her license/registration has been assigned. **Only persons listed on this form with signatures attached, shall be authorized to sign permit applications.**

The following information shall be furnished and the following section shall be completed in full. Licensee/registrant: **List yourself on the appropriate line. Have all authorized persons who sign permit applications sign on the line adjacent to their printed name.**

(PLEASE CHECK ONE) ☐ Individual Only ☐ Sole Proprietorship ☐ Partnership ☐ Corporation

Full Name Of Business (must be identical to name appearing on bond) _____ Federal ID# _____

Business Address _____ City _____ State _____ Zip _____ Telephone _____

Email Address: _____

Licensee/Registrant (Print Or Type Name) _____ Signature _____

Home Address _____ City _____ State _____ Zip _____ Telephone _____

1 _____
Authorized Signer (Print Or Type Name) _____ Signature _____

Home Address _____ City _____ State _____ Zip _____ Telephone _____

2 _____
Authorized Signer (Print Or Type Name) _____ Signature _____

Home Address _____ City _____ State _____ Zip _____ Telephone _____

3 _____
Authorized Signer (Print Or Type Name) _____ Signature _____

Home Address _____ City _____ State _____ Zip _____ Telephone _____

4 _____
Authorized Signer (Print Or Type Name) _____ Signature _____

Home Address _____ City _____ State _____ Zip _____ Telephone _____

5 _____
Authorized Signer (Print Or Type Name) _____ Signature _____

Home Address _____ City _____ State _____ Zip _____ Telephone _____

The following individual requests a Contractor license/registration be assigned to the above business, and hereby assigns the rights of that license/registration.

Type Of Trade _____ License/Registration # _____ Licensee/Registration Holder Signature & Position Held In Company _____

Sworn to before me and signed in my presence this _____ day of _____ in the year _____

Notary Seal Here _____
Signature of Notary Public _____ My Commission Expires _____

INSTRUCTIONS FOR COMPLETING THE CONTRACTOR LICENSE / REGISTRATION BOND

NOTICE TO CONTRACTOR: Please give these instructions to your bonding company and or agent to ensure that all the information is correctly provided on the bond.

NOTICE TO BONDING COMPANY AND AGENT: Please follow the instructions below when completing this 'Contractor License / Registration Bond' form. We have provided a 'Sample' bond form for your convenience. Please refer to the 'Sample' for any questions you may have with regard to completing the bond form. Please also note the following:

- Form:** Please use the bond form provided by the City of Columbus if this is a new License / Registration or if the bond is being submitted for the first time. In the case of a renewal for an existing License(s) / Registration(s) and corresponding bond, we will accept a Continuation Certificate.
- Bond Number and Effective Date:** Please enter the Bond Number and the Effective Date of the bond on the lines provided.
- Amount of Bond:** All 'Contractor License / Registration Bonds' are set at \$25,000.00. Please do not change this amount.
- Individual Licensee / Registrant:** Please insert the name of the Individual who holds the License or Certificate as it appears on the License / Registration application.
- Company Name:** If the contractor is doing business as a company or assigning its License / Registration to a business, then please insert the exact name of the business as it appears on the Contractor Renewal Form or OCILB License. If the contractor is conducting business as an individual, meaning, that a business or corporate name is not being used, then this line can be left blank. (Since contractors can do business under a variety of names, many will use more than one name. This bond must contain the exact full business name which the contractor will use when doing business with the City of Columbus. If the contractor is assigning its License / Registration to a business, then it must insert the exact full business name on this bond.)
- Name of Bonding Company:** Please insert the complete name of the bonding company. Also, please note that the name of this Surety must also appear on the Power of Attorney which is to be attached.
- EXPIRATION DATE:** Since the City of Columbus handles a large number of License / Registrations, it has adopted a schedule for when the License / Registration will expire annually. The annual expiration date is based on the first letter of the last name of the Individual who is designated as the individual responsible for the License / Registration. Please note that, in accordance with the City Building Code, a new License / Registration will be issued for a minimum period of seven (7) months. Any new License / Registration submitted within the seven (7) month period prior to the applicable date set forth below will expire one (1) year from the relevant date listed below. Please use the following schedule to determine the appropriate expiration date for your License / Registration:

Last Name Begins With	License / Registration to Expire
A through F	December 31
G through L	March 31
M through R	June 30
S through Z	September 30

- Date and Signing of Bond:** Please enter the date in which the bond is being executed. It is important that this date be on or after the effective date in which the Power of Attorney is dated. If the Power of Attorney is dated after the date in which the bond is executed, then the bond will be considered invalid. Please print or type the name of the Individual who holds the License or Certificate, as indicated in No. 4 above. The Individual also needs to provide an original signature. Please print or type the name of the Surety, as indicated in No. 6 above. The bond must be signed by the Attorney-in-Fact. An electronic or facsimile signature of the Attorney-in-Fact will be accepted if the appropriate box at the bottom of the form is checked. Lastly, please provide the telephone number of the Attorney-in-Fact who can be contacted with any questions.
- Surety Seal:** If the Surety has checked the box indicating that an electronic or facsimile seal is authorized, then we will accept an electronic or facsimile seal. If the box is not checked, then we require an original imprinted seal or affixed sticker for a seal. If the seal is not provided as required, then we will consider the bond to be invalid and will return it to the Licensee / Registrant.

When the bond form has been properly completed, please return it to the Licensee / Registrant. Do not return the bond form to our office. The Licensee / Registrant must complete additional paperwork and attach a Check in payment of the License / Registration fee. We require all of the paperwork to be submitted as a single submission.

QUESTIONS: If you have any questions regarding these instructions, then please call (614) 645-6083. This is a voice recorded mailbox. You may leave your name, telephone number, and a brief description of your question, and one of our Customer Service Representatives will return your call.

CONTRACTOR LICENSE / REGISTRATION BOND FORM

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Bond #: _____ 2 _____ Effective Date: _____ 2 _____

Amount: \$25,000.00 3

KNOW ALL MEN BY THESE PRESENTS:

That (Insert Name of Individual Licensee / Registrant) _____ 4 _____

of (Insert Company Name) _____ 5 _____

as Principal, and (Insert Name of Bonding Company) _____ 6 _____

as Surety, are held and firmly bound unto the City of Columbus, c/o City Treasurer, City Hall, 90 West Broad Street, Columbus, Ohio 43215, as Obligee, in the sum of **Twenty Five Thousand and no/100 Dollars (\$25,000.00)** to be paid to said Obligee, its successors and assigns, and for the payment thereof well and truly to be made, we, the Principal and Surety, jointly and severally bind ourselves, our heirs, executors, administrators, successors, and assigns firmly by these presents. The conditions of the above obligation are such that:

WHEREAS, the above Principal has or is about to apply to said Obligee for a License / Registration as a Contractor effective upon approval and expiring in accordance with the last name of the individual applicant as set out in the expiration schedule listed in the instructions for this form, pursuant to Chapter 33 or 41 of the Columbus City Codes, 1959, as applicable.

WHEREAS, the expiration date of this bond shall coincide with the expiration date of said License/Registration. 7

WHEREAS, the Principal, its agents and employees shall save the City of Columbus harmless from all loss and damage to persons or property which may be occasioned in any way, by accident or the want of care or skill on the applicant's part, in the prosecution of the work contracted, performed, pursued or attempted under such License / Registration, pursuant to Columbus City Code Chapter 33 or 41, as applicable.

NOW THEREFORE, if the License / Registration shall be issued to the Principal and the Principal, its agents and employees shall save the City of Columbus harmless from all loss and damage to persons or property of the City of Columbus and aforesaid, then this obligation shall be void; otherwise, the same shall remain in full force and effect.

IT IS FURTHER UNDERSTOOD AND AGREED that the Surety reserves the right to cancel this bond by giving thirty (30) days written notice to the Obligee c/o Director for the Department of Building and Zoning Services, 757 Carolyn Avenue, Columbus, Ohio 43224 and, upon receipt of such cancellation notice, the Surety is relieved of any further liability. The Surety will be liable for loss accruing up to the effective date of said cancellation; but, in no event will the liability to the Surety exceed \$25,000.00

Signed this _____ 8 _____ day of _____ 8 _____, in the year _____ 8 _____.

LICENSEE / REGISTRANT: _____ 8 _____ By: _____ 8 _____
(PRINT OR TYPE NAME) (SIGNATURE)

SURETY: _____ 8 _____ By: _____ 8 _____
(PRINT OR TYPE NAME) (SIGNATURE)
Attorney-in-Fact

Telephone No. of Attorney-in-Fact for Surety _____ 8 _____

If the box below is marked, then an electronic / facsimile signature will be accepted:

Place Surety Seal Here

9

- ☐ Pursuant to a Resolution adopted by the Surety or in accordance with it's Bylaws, the above referenced Surety allows signatures, appointed by the attached Power of Attorney, and Company Seal to be printed electronically or by facsimile and such bond so executed, sealed and certified with respect to any bond or undertaking to which it is attached shall continue to be valid and binding upon the Surety.

NOTICE TO AGENT AND SURETY:

Please refer to the Instructions on the other side of this bond form.

CONTRACTOR LICENSE / REGISTRATION BOND FORM

Bond #: _____ Effective Date: _____

Amount: **\$25,000.00**

KNOW ALL MEN BY THESE PRESENTS:

That **(Insert Name of Individual Licensee / Registrant)** _____
of **(Insert Company Name)** _____
as Principal, and **(Insert Name of Bonding Company)** _____

as Surety, are held and firmly bound unto the City of Columbus, c/o City Treasurer, City Hall, 90 West Broad Street, Columbus, Ohio 43215, as Obligee, in the sum of **Twenty Five Thousand and no/100 Dollars (\$25,000.00)** to be paid to said Obligee, its successors and assigns, and for the payment thereof well and truly to be made, we, the Principal and Surety, jointly and severally bind ourselves, our heirs, executors, administrators, successors, and assigns firmly by these presents. The conditions of the above obligation are such that:

WHEREAS, the above Principal has or is about to apply to said Obligee for a License / Registration as a Contractor effective upon approval and expiring in accordance with the last name of the individual applicant as set out in the expiration schedule listed in the instructions for this form, pursuant to Chapter 33 or 41 of the Columbus City Codes, 1959, as applicable.

WHEREAS, the expiration date of this bond shall coincide with the expiration date of said License/Registration.

WHEREAS, the Principal, its agents and employees shall save the City of Columbus harmless from all loss and damage to persons or property which may be occasioned in any way, by accident or the want of care or skill on the applicant's part, in the prosecution of the work contracted, performed, pursued or attempted under such License / Registration, pursuant to Columbus City Code Chapter 33 or 41, as applicable.

NOW THEREFORE, if the License / Registration shall be issued to the Principal and the Principal, its agents and employees shall save the City of Columbus harmless from all loss and damage to persons or property of the City of Columbus and aforesaid, then this obligation shall be void; otherwise, the same shall remain in full force and effect.

IT IS FURTHER UNDERSTOOD AND AGREED that the Surety reserves the right to cancel this bond by giving thirty (30) days written notice to the Obligee c/o Director for the Department of Building and Zoning Services, 757 Carolyn Avenue, Columbus, Ohio 43224 and, upon receipt of such cancellation notice, the Surety is relieved of any further liability. The Surety will be liable for loss accruing up to the effective date of said cancellation; but, in no event will the liability to the Surety exceed \$25,000.00

Signed this _____ day of _____, in the year _____.

LICENSEE / REGISTRANT: _____ By: _____
(PRINT OR TYPE NAME) (SIGNATURE)

SURETY: _____ By: _____
(PRINT OR TYPE NAME) (SIGNATURE)
Attorney-in-Fact

Telephone No. of Attorney-in-Fact for Surety _____

If the box below is marked, then an electronic / facsimile signature will be accepted:

☐ Pursuant to a Resolution adopted by the Surety or in accordance with it's Bylaws, the above referenced Surety allows signatures, appointed by the attached Power of Attorney, and Company Seal to be printed electronically or by facsimile and such bond so executed, sealed and certified with respect to any bond or undertaking to which it is attached shall continue to be valid and binding upon the Surety.

Place Surety Seal Here

NOTICE TO AGENT AND SURETY: Please refer to the Instructions on the other side of this bond form.